

JENNIFER M. GRANHOLM GOVERNOR JOHN D. CHERRY, JR. LT. GOVERNOR

SUPPLEMENTAL QUESTIONNAIRE

Applicant for Executive Director of the Michigan Gaming Control Board

For the following questions, please type all responses. Use a separate sheet if necessary for more detailed responses. Please return this supplemental questionnaire to:

Appointments Division
Office of Governor Jennifer M. Granholm
111 South Capitol Avenue
P.O. Box 30013
Lansing, MI 48909
(517) 335-7899 (fax)
appoint@michigan.gov

Including, b	ut not limited to, any of the following:
	nduct that would lead a reasonable person, knowing all of the circumstances, to conclude be biased against or in favor of an applicant.
h) Accept	ance of any form of compensation other than from the Michigan Gaming Control Board
	ance of any form of compensation other than from the Michigan Gaming Control Board ndered as part of the Executive Director's official duties.
c). Particip	ation in any business being transacted with or before the Michigan Gaming Control Boa
c). Particip	ndered as part of the Executive Director's official duties.

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	Demonstration, through work or other action in the performance of the official duties of the Executive tor of the Michigan Gaming Control Board of any preferential attitude or treatment of any person.
	TIME DUTIES. If appointed, would you devote your full time to the duties of the Executive Director Michigan Gaming Control Board?
	SIDE EMPLOYMENT. If appointed as the Executive Director of the Michigan Gaming Control Board by you hold any other office or employment?
direct Michi applic	NO INTERESTS/EMPLOYMENT. During the immediately preceding 3 years, have you held any to rindirect interest in, or employment by: (a) a person who is licensed to operate a casino in gan; (b) a person who is licensed to operate a casino in another jurisdiction; (c) a person with an cation pending to operate a casino in Michigan; or (d) a person with an application pending to ate a casino in another jurisdiction?
spous	NSEE/ENTERPRISE INTERESTS. Are you, your spouse, parent, child, child's spouse, sibling, or see of a sibling a member of the board of directors of, or a person financially interested in: (a) any on licensed as a casino licensee or supplier; (b) any person who has an application for a license ing before the Michigan Gaming Control Board; or (c) a casino enterprise?
	<u>T-APPOINTMENT RESTRICTION</u> . Do you agree to be bound by the statutory prohibition under 432.203(13) that the Executive Director of the Michigan Gaming Control Board may not:
a).	Hold any direct or indirect interest in an applicant, a person licensed by or registered with the Michigan Gaming Control Board, or a casino enterprise for a period of 4 years after your service as Executive Director of the Michigan Gaming Control Board?
b).	Be employed by an applicant, a person licensed by or registered with the Michigan Gaming Control Board, or a casino enterprise for a period of 4 years after your service as Executive Director of the Michigan Gaming Control Board?

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	c). Enter into a contract for services with an applicant, a person licensed by or registered with the Michigan Gaming Control Board, or a casino enterprise for a period of 4 years after your service as Executive Director of the Michigan Gaming Control Board?
S-7).	INTEREST IN LICENSEE OR APPLICANT. Are you or your spouse, parent, child, or child's spouse a member of the board of directors of, financially interested in, or employed by a licensee or applicant for a license under the Michigan Gaming Control and Revenue Act? If yes, please describe.
S-8).	REAL PROPERTY. Do you have any legal or beneficial interests in any real property that is or that may be directly or indirectly involved with gaming or gaming operations authorized by the Michigan Gaming Control and Revenue Act? If yes, please describe.
S-9).	GAMING-RELATED CRIME. Have you ever been indicted, charged with, convicted of, pled guilty or nolo contendere to, or forfeited bail concerning a misdemeanor involving gambling, dishonesty, theft, or fraud or a local ordinance in any state involving gambling, dishonesty, theft, or fraud that substantially corresponds to a misdemeanor in that state, or a felony under Michigan law, the laws of any other state, or the laws of the United States, or any other jurisdiction? If yes, please describe.
S-10).	EMPLOYMENT OFFERS. Have you received an invitation, written or oral, to initiate a discussion concerning employment or the possibility of employment with a person or affiliate of a person who is a licensee or an applicant under the Michigan Gaming Control and Revenue Act? If yes, please describe.
S-11).	GIFTS. Have you or your parent, spouse, sibling, spouse of a sibling, child, or spouse of a child accepted any gift, gratuity, compensation, travel, lodging, or anything of value, directly or indirectly, from any licensee or any applicant or affiliate or representative of an applicant or licensee under the Michigan Gaming Control and Revenue Act? If yes, please describe.
S-12).	BRIBERY. Have you ever been approached or offered a bribe in violation of MCL 750.118 or the

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S-13). PAST INVOLVEMENT WITH CASINO INTEREST. Please describe any past involvement with any

Michigan Gaming Control and Revenue Act? If yes, please describe.

casino interest during the past 5 years.

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S-14).	<u>POLITICAL ACTIVITY</u> . If appointed, do you agree to comply with the prohibition under MCL 432.204d on engaging in political activity or politically related activity during the duration of the appointment?
S-15).	PARTICIPATION IN GAMING ACTIVITY. a). When was the last date on which you participated in or wagered on any gambling game conducted by any licensee or applicant or any affiliate of an applicant or a licensee in Michigan or in any other jurisdiction?
	b). If appointed, will you participate in or wager on any gambling game conducted by any licensee or applicant or any affiliate of an applicant or a licensee in Michigan or in any other jurisdiction?
S-16).	COMPULSIVE GAMBLING. Have you ever been treated for compulsive gambling or other addictive behavior? If yes, please describe.
S-17).	<u>DISASSOCIATED PERSONS</u> . Have you ever been placed on a list of disassociated persons maintained by the Michigan Gaming Control Board or another gaming regulatory body in another jurisdiction? If yes, please describe.
S-18).	LOBBYING ACTIVITY. a). Have you ever been compensated for direct contact with a lobbyable public official in Michigan with the purpose of influencing the official's legislative or administrative actions? If yes, please describe.
	b). Have you or an entity over which you exercise direction and/or control ever registered as a lobbyist or a lobbyist agent in Michigan? If yes, please describe.
S-19).	COMPENSATION AND STATE ACTION. Have you been compensated based or contingent upon favorable action by an official in the legislative or executive branch of state government, including, but not limited to, action relating to a state contract? If yes, please describe.
	

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S-19).	MORAL CHARACTER. If you are appointed, are you aware of any circumstances that would lead a person or entity to allege that you lack the integrity, moral character, or reputation necessary to assure the continued integrity of the Michigan Gaming Control Board or its work? If yes, please describe.
S-20).	ADVICE AND CONSENT. This position is subject to the advice and consent of the Michigan Senate and if appointed, you may be rejected by the Michigan Senate. The Michigan Senate and its staff often conduct detailed background investigations of gubernatorial appointees independent of the Governor's appointment process. If you are appointed, are you aware of any facts, circumstances, actions, relationships, or allegations that would lead a person or entity to urge one or more members of the Michigan Senate to reject or criticize your appointment? If yes, please describe.
S-21).	BOARD INTEGRITY. Please disclose any other material information relating to your background that you believe may be necessary to ensure that the integrity of the Michigan Gaming Control Board and its work is maintained.
and liab	complete and return with this questionnaire the attached financial disclosure statement listing all assets illities, property and business interests, and sources of income, including for your spouse and the attached ion and disclosure statement.
I, and all	, attest that all responses provided to the above questions accompanying materials, are, to the best of my knowledge, true and accurate.
	Signature:
Subscr	bed and sworn to before me on,
My con	mission expires: Signature:
Notary	Date Dublic, State of Michigan, County of County

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